

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2005 8:00 am
Secretary of State

01-27-2005 90078 021 ****50.00

DOCUMENT # L04000012118 1. Entity Name GARY TANNENBAUM CPA LLC					
Principal Place of Business 9128 COVE POINT CIR BOYNTON BEACH, FL 33437			Mailing Address 9128 COVE POINT CIR BOYNTON BEACH, FL 33437		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent TANNENBAUM, GARY 9128 COVE POINT CIR BOYNTON BEACH, FL 33437			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM TANNENBAUM, GARY 9128 COVE POINT CIR BOYNTON BEACH, FL 33437 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.					
SIGNATURE:			Date 3/22/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					